

County: Shawano
MAPLE LANE HEALTH CARE CENTER
N4231 STATE HIGHWAY 22

Facility ID: 5350

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SHAWANO 54166 Phone:(715) 526-3158
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 78
Total Licensed Bed Capacity (12/31/02): 78
Number of Residents on 12/31/02: 74

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 74

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.6
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		35.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	13.5	More Than 4 Years		43.2
Day Services	No	Mental Illness (Org./Psy)	51.4	65 - 74	18.9			-----
Respite Care	No	Mental Illness (Other)	33.8	75 - 84	29.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	31.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	2.7	65 & Over	86.5	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		9.2
Referral Service	No	Diabetes	4.1	Sex	%	LPNs		8.1
Other Services	No	Respiratory	0.0	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	8.1	Male	29.7	Aides, & Orderlies		54.9
Mentally Ill	No		-----	Female	70.3			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All	
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%			Per Diem (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	62	98.4	108	0	0.0	0	10	100.0	120	1	100.0	108	0	0.0	0	73	98.6
Intermediate	---	---	---	1	1.6	90	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		63	100.0		0	0.0		10	100.0		1	100.0		0	0.0		74	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											

Percent Admissions from:		Activities of		%	% Needing Assistance of		% Totally		Total				
		Daily Living (ADL)		Independent	One Or Two Staff		Dependent		Number of Residents				
Private Home/No Home Health	8.7	Bathing		5.4	64.9		29.7		74				
Private Home/With Home Health	0.0	Dressing		20.3	59.5		20.3		74				
Other Nursing Homes	43.5	Transferring		33.8	52.7		13.5		74				
Acute Care Hospitals	21.7	Toilet Use		29.7	56.8		13.5		74				
Psych. Hosp.-MR/DD Facilities	13.0	Eating		54.1	27.0		18.9		74				
Rehabilitation Hospitals	0.0	*****											
Other Locations	13.0												
Total Number of Admissions	23	Continence			% Special Treatments				%				
Percent Discharges To:		Indwelling Or External Catheter			1.4		Receiving Respiratory Care		5.4				
Private Home/No Home Health	4.8	Occ/Freq. Incontinent of Bladder			56.8		Receiving Tracheostomy Care		0.0				
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel			32.4		Receiving Suctioning		0.0				
Other Nursing Homes	4.8						Receiving Ostomy Care		4.1				
Acute Care Hospitals	4.8	Mobility					Receiving Tube Feeding		1.4				
Psych. Hosp.-MR/DD Facilities	14.3	Physically Restrained			0.0		Receiving Mechanically Altered Diets		40.5				
Rehabilitation Hospitals	0.0												
Other Locations	14.3	Skin Care					Other Resident Characteristics						
Deaths	57.1	With Pressure Sores			4.1		Have Advance Directives		100.0				
Total Number of Discharges		With Rashes			12.2		Medications						
(Including Deaths)	21						Receiving Psychoactive Drugs		81.1				

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities													

		This Facility	Ownership: Government		Bed Size: 50-99		Licensure: Skilled		All				
		%	Peer Group		Peer Group		Peer Group		Facilities				
			% Ratio		% Ratio		% Ratio		% Ratio				
Occupancy Rate: Average Daily Census/Licensed Beds		94.9	86.3	1.10	83.5	1.14	83.3	1.14	85.1 1.11				
Current Residents from In-County		77.0	75.8	1.02	72.9	1.06	75.8	1.02	76.6 1.01				
Admissions from In-County, Still Residing		43.5	27.1	1.61	22.2	1.96	22.0	1.98	20.3 2.14				
Admissions/Average Daily Census		31.1	96.4	0.32	110.2	0.28	118.1	0.26	133.4 0.23				
Discharges/Average Daily Census		28.4	98.7	0.29	112.5	0.25	120.6	0.24	135.3 0.21				
Discharges To Private Residence/Average Daily Census		1.4	41.6	0.03	44.5	0.03	49.9	0.03	56.6 0.02				
Residents Receiving Skilled Care		98.6	91.9	1.07	93.5	1.06	93.5	1.05	86.3 1.14				
Residents Aged 65 and Older		86.5	87.8	0.98	93.5	0.92	93.8	0.92	87.7 0.99				
Title 19 (Medicaid) Funded Residents		85.1	67.7	1.26	67.1	1.27	70.5	1.21	67.5 1.26				
Private Pay Funded Residents		13.5	19.7	0.69	21.5	0.63	19.3	0.70	21.0 0.64				
Developmentally Disabled Residents		0.0	0.6	0.00	0.7	0.00	0.7	0.00	7.1 0.00				
Mentally Ill Residents		85.1	47.5	1.79	39.0	2.18	37.7	2.26	33.3 2.55				
General Medical Service Residents		8.1	15.9	0.51	17.6	0.46	18.1	0.45	20.5 0.40				
Impaired ADL (Mean)		45.4	47.8	0.95	46.9	0.97	47.5	0.96	49.3 0.92				
Psychological Problems		81.1	56.9	1.42	54.6	1.49	52.9	1.53	54.0 1.50				
Nursing Care Required (Mean)		8.4	5.9	1.43	6.8	1.25	6.8	1.25	7.2 1.17				